Association of Aripiprazole With the Risk for Psychiatric Hospitalization, Self-harm, or Suicide

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This study shows that concerns regarding the severe exacerbation of psychiatric symptoms among patients who are given aripiprazole following treatment with other anti-psychotics are largely unfounded.

Reports that aripiprazole was associated with reactions leading to hospitalization, self-harm, or suicide were alarming because, since coming on the market in 2005, it has become a popular treatment option as it induces fewer side effects than first generation anti-psychotics, most notably with respect to weight gain and metabolic adverse events. This population-based cohort study of more than 1600 patients starting aripiprazole compared with patients starting other antipsychotics did not find an increased risk of hospitalization, self harm or suicide, which are at the extreme end of clinical worsening. The data did not allow for study of less severe clinical worsening that can be managed in an out-patient setting. Also, it included only patients treated by general practitioners, not those who are only followed by a psychiatrist.

While these results should reassure physicians who intend to introduce patients to aripiprazole, the authors recommend replication in larger population-based studies. Furthermore, study is warranted to see whether less serious psychiatric episodes may be associated with switching to aripiprazole.